

# Community Health Needs Assessment

**Louisville, Kentucky 2017**



# Who?

**3500 survey participants in Jefferson County, Kentucky**

**82 participants in 8 focus groups**



# When?

**Surveys conducted between December 2017 and March 2018**

**Focus groups conducted between June and August, 2018**

# What?

**Online and paper survey in 6 languages (English, Spanish, Arabic, French, Swahili, Nepali)**

# Why?

**Participants tell us about the good and bad things in their community, and share a little about how they access health care. Results help us all build a plan to improve the health of Louisville.**

# Basic Survey Demographics



Trans\* and  
Other 1%

## Gender



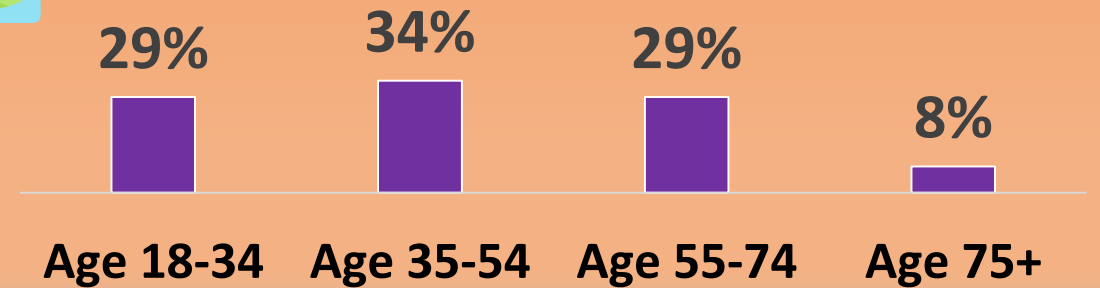
Male  
49%



Female  
52%

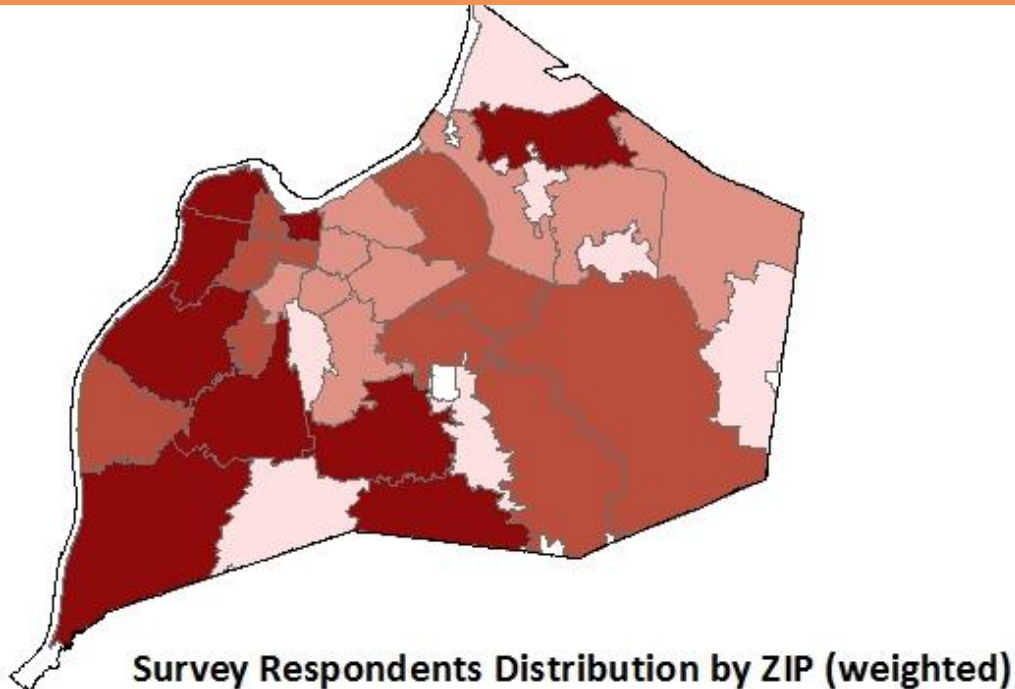


## Age Groups



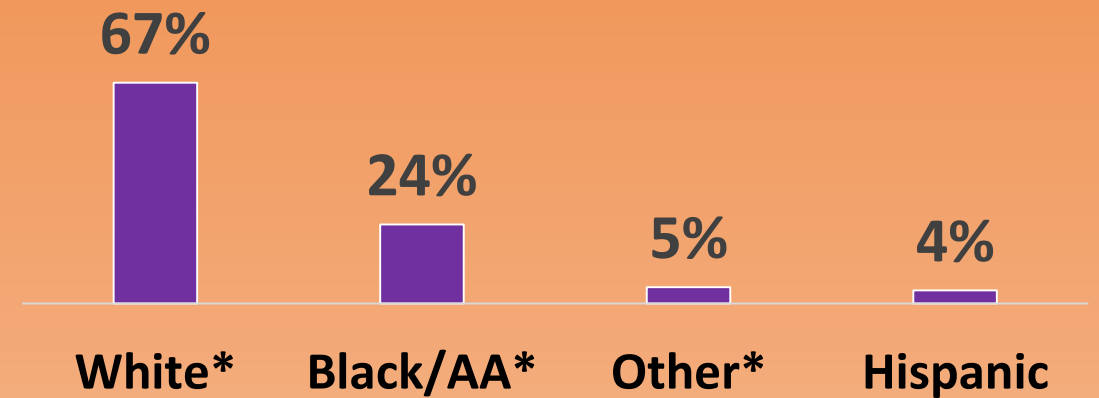
# Basic Survey Demographics

## Region



Source: Community Health Needs Assessment, 2017.

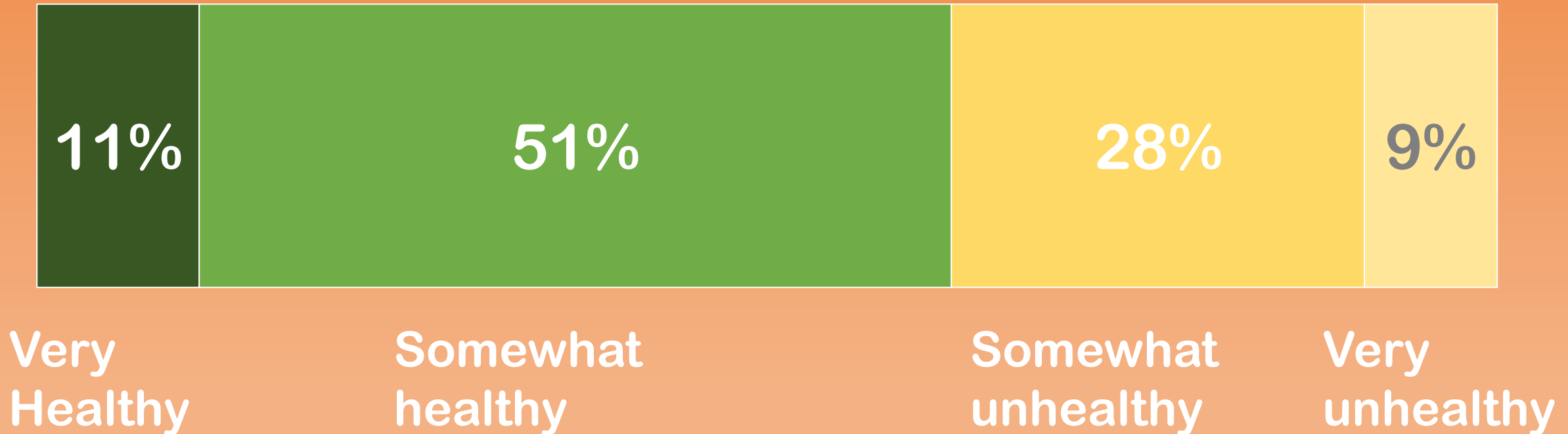
## Race/Ethnicity



\*Non-Hispanic

# How healthy is your community?

Over three-fifths of residents are optimistic about the health of their community



Note: Respondents were asked to think of their ZIP code when asked about “community.”

# What do our communities need to be healthy?

**Access to health care** (35%)

**Access to affordable fresh food** (34%)

**Good schools** (33%)

**Good jobs** (33%)

**Clean environment** (33%)



# Insights from focus group participants – Access to health care



Healthcare system **difficult to navigate**

Lack of **transportation & affordability**

**Mistrust of healthcare system**

**Language barriers with interpreters**

**Confusion in what was covered by insurance**

# What are the barriers to receiving health care?

**Timely appointments** (23%)

**Can't take time off work** (22%)

**Can't afford prescription** (18%)

**Can't afford visit** (17%)

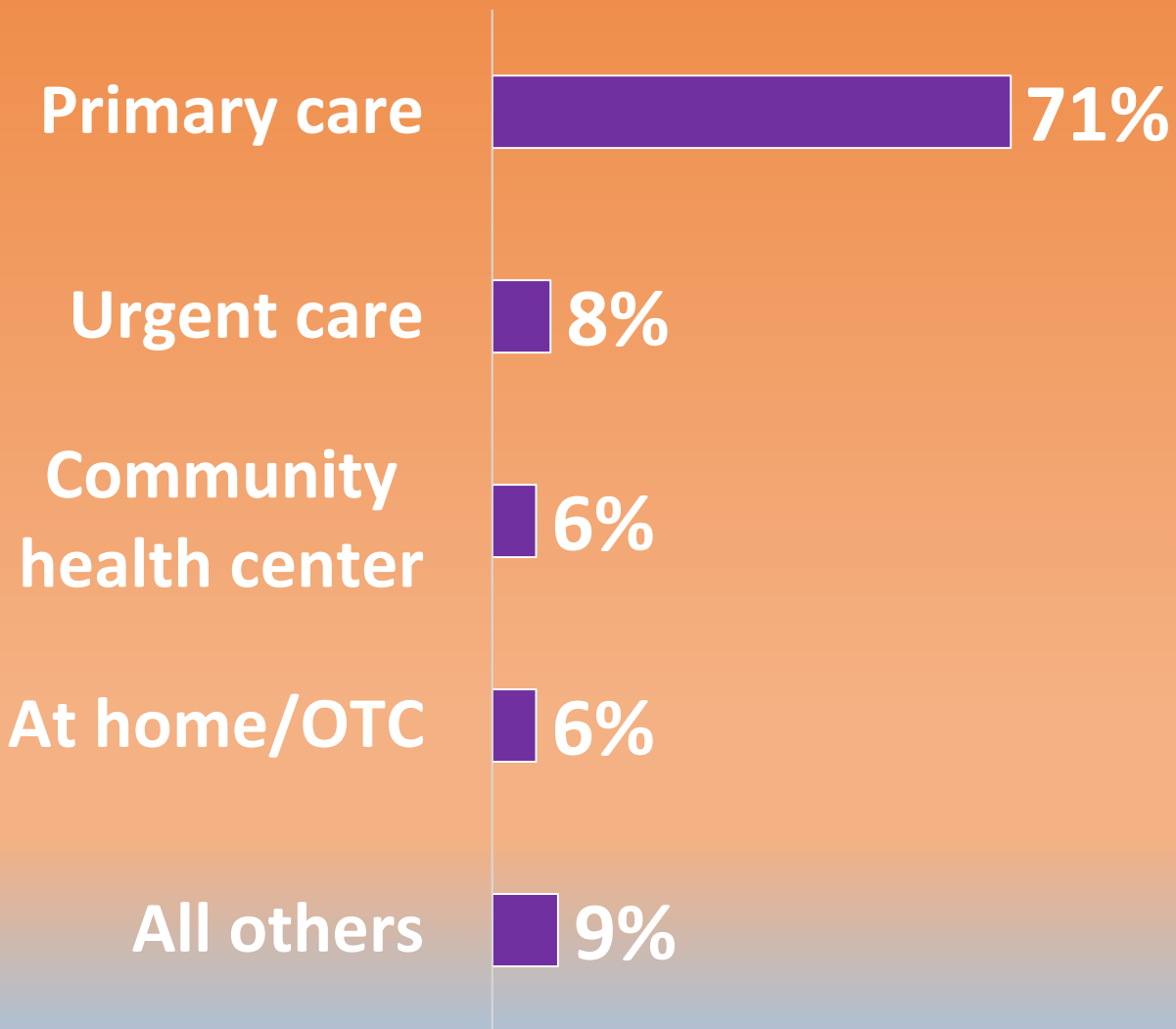


Note: Respondents were asked about financial barriers and non-financial barriers in 2 separate questions. Items above show the highest responses across the two questions.

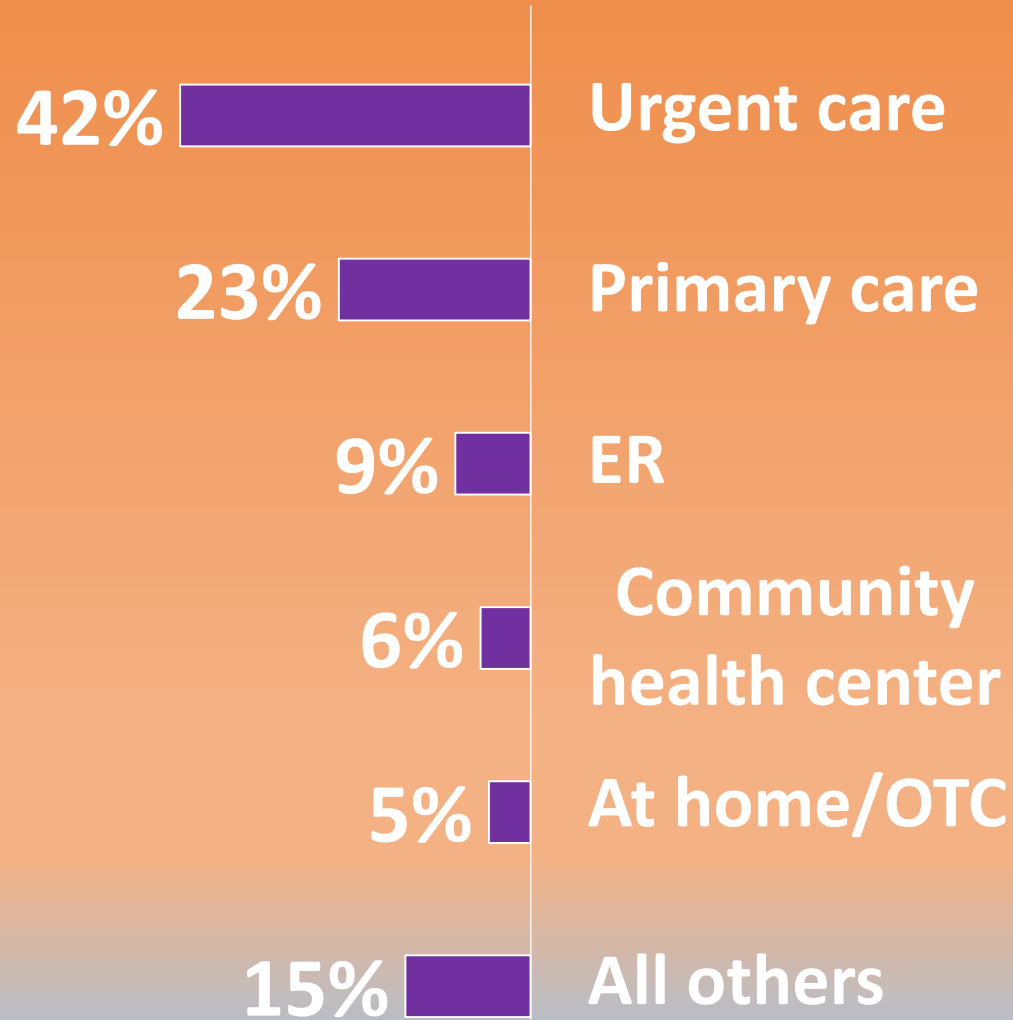


# Where do you go for health care?

## Regular source of care



## Secondary source of care

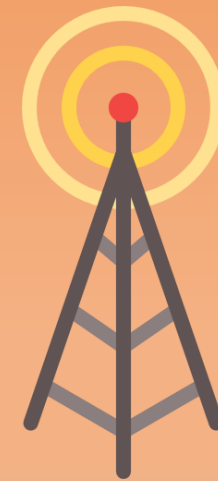


# Where do you go for health info?



**Doctor or Nurse\*** (73%)

**Internet** (12%)



All others: 15%

\*Net

# What does your community need to work on?

**Drug abuse** (62%)

**Distracted driving** (39%)

**Poor eating habits** (33%)

**Alcohol abuse** (32%)

**Tobacco abuse** (32%)



# Other challenges we face

**62%** ever personally face **discrimination**

**28%** sometimes or often **feel socially isolated**

**23%** sometimes or often **cannot afford food**

**19%** live in **poor housing** conditions

**14%** don't have or are worried about **losing housing**

**11%** don't have **health insurance**

# Insights from focus group participants



Homeless – shelter **safety** and **discrimination**

Difficult to **navigate social services**

Lack of **affordable, safe housing**

Difficulty to **provide care to sick or disabled family members.**

**Positives: strong social support networks**  
throughout our communities

# What are the most important health outcomes?

**Addiction** (64%)

**Obesity** (35%)

**Gun violence** (33%)

**Mental health** (26%)

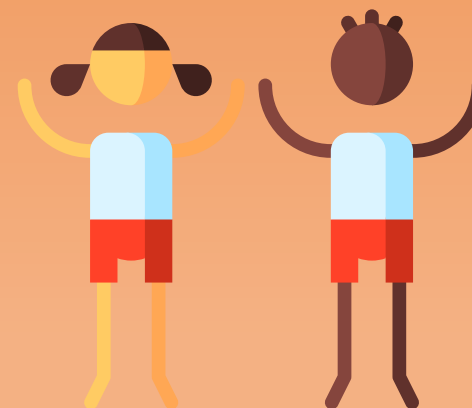
**Heart disease** (23%)



# Key Takeaways

- ✓ Louisville residents continue to struggle to navigate and access affordable health care.
- ✓ Primary care providers play a major role in providing health and information to the community but many residents have a hard time getting timely, affordable health care.
- ✓ Drug addiction remains top-of-mind as a major health problem facing the community.
- ✓ Quality, affordable housing and food are not available for all residents.

# Achieving Healthier Communities through Partnerships and Planning



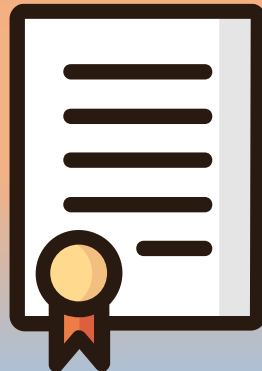


# Forces of Change Assessment

- An assessment where external, **positive** or **negative**, factors impacting public health are identified.
- Answers:
  - What is occurring or might occur that affects the health of Jefferson County residents or the local public health system?
  - What specific threats and/or opportunities are generated by the occurrences?

# What are Forces of Change

- Trends, events, and factors that can impact public health.
  - Trends are patterns over time.
    - Ex: Migration in and out of a community or growing disillusionment with government.
  - Factors are discrete elements.
    - Ex: A community's demographic composition, a high population density, or a jurisdiction proximity
  - Events are one time occurrences.
    - Ex: A hospital closure, a natural disaster, or the passage of new legislation



# What Kind of Areas or Categories are Included

- Social
- Economic
- Political
- Technological
- Environmental
- Scientific
- Legal
- Ethical



# How to Identify Forces of Change

- What has occurred recently that may affect our community of our local public health system?
- What may occur in the future?
- Are there any trends occurring that will have an impact?
- What forces are occurring locally? Regionally? Nationally? Globally?
- What characteristics of our jurisdiction or state may pose an opportunity or threat?
- What may occur or has occurred that may pose a barrier to achieving the shared vision?

# Using Forces of Change while community planning will...

- Create a healthy community and better quality of life.
- Increase the visibility of public health within the community.
- Anticipate and manage change.
- Create a stronger public health infrastructure.
- Engage the community and create community ownership.

# Louisville Metro Forces of Change

- Diverse group of community and public health leaders met in April of 2018.
- Forces as well as the threats and opportunities associated with each force were prioritized



# Identified Forces of Change

- Structural Racism and Violence
- Changes in health care
- Increase in joblessness/underemployment



# Structural Racism and Violence

- Threats

- Historic wealth
- Disparities in health and education attainment
- Environmental racism



- Opportunities

- Restorative interventions
- Workforce development and living wage jobs
- Informed trauma interventions





# Changes in healthcare



- Threats

- Cost distribution for uninsured
- Phase out of disproportionate sharing funds for hospitals
- Provider capacity may be limited

- Opportunities

- Having coverage allows for wider healthcare system access that is flexible and adjustable based on need
- Increased trauma informed care

# Increase in joblessness/unemployment

- Threats

- Increase home insecurity and increased food insecurity
- Increased mental health issues and increased depression
- Decreased social capital



- Opportunities

- Increased return on investment and increased social change
- Local business to create jobs
- Co-operative economic